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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket No. (Optional) 8733.385.00
In re Application of Jong-Sung Kim		
Application Number 09/771,591 Filed January 30, 2001		
For: IN-PLANE SWITCHING LCD PANEL		
Art Unit 2871		Examiner Minh Toan T. Ton

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows (check time period desired):

- |  |           |
|--|-----------|
| <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))  | \$ 120.00 |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))  | \$ _____  |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3))  | \$ _____  |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))   | \$ _____  |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))   | \$ _____  |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____ |           |
| <input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.  |           |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.  |           |
| <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.   |           |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-0911     |           |

I have enclosed a duplicate copy of this sheet.

I am the  applicant/inventor.

assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

attorney or agent of record. Registration Number 53,005  
 attorney or agent under 37 CFR 1.34(a).  
Registration number if acting under 37 CFR 1.34(a) \_\_\_\_\_

November 19, 2007  
Date

Valerie P. Hayes  
Signature

(202) 496-7500  
Telephone Number

Valerie P. Hayes  
Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. see below

<input checked="" type="checkbox"/> Total of 1 forms are submitted.
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